

## Sexually transmitted diseases:

Extract from the *annual report of the Chief Medical Officer of the Department of Health and Social Security for the year 1983*

The total number of new cases reported by the clinics in England alone in 1982 exceeded half a million. There were 517 668 new cases (296 675 men and 220 993 women), an increase of 8% over 1981 (tables I-IV). The problems of recent years remain, including that of  $\beta$  lactamase producing *Neisseria gonorrhoeae*. A major concern is whether the acquired immune deficiency syndrome (AIDS) will continue to increase to the proportions described in the USA.

Diseases that showed an upward trend in recent years in the annual numbers of new cases were non-specific genital infection, candidosis, pubic lice, herpes simplex, genital warts, and molluscum contagiosum.

### Acquired immune deficiency syndrome (AIDS)

In the USA there had been reported a cumulative total of 3 000 cases of AIDS up to 31 December 1983, with death occurring in 43% of patients. Homosexual or bisexual men comprised 71% of cases and 17% were intravenous drug users. Surveillance of AIDS in the UK is undertaken by the Communicable Disease Surveillance Centre (CDSC), and by the end of 1983 there had been 31 cases (29 men, 2 women) reported to the CDSC. Four of these cases had presented in 1981 and nine in 1982. Twenty five (81%) were homosexual or bisexual men. So far, 16 of the 31 cases have died.

The cause remains unknown, but is likely to be a viral agent transmitted by sexual contact, transfusion of blood, and certain blood products. The incubation period can be as long as three years or more.

### Gonorrhoea

Despite a slight increase in cases in women, the overall incidence of gonorrhoea was virtually unchanged for the year ending 31 December 1982 (tables I and III). The number of infections with  $\beta$  lactamase producing (penicillinase producing) *Neisseria gonorrhoeae* continues to increase, and in 1983 1223 cases were reported by laboratories in the UK compared with 1033 in 1982 and 443 in 1981. Of the 954 cases in 1983 in which the source of infection was stated, only 27% were acquired abroad. A World Health Organisation Consultative Group has recently produced recommendations on the treatment of these and other sexually transmitted infections.<sup>1</sup>

### Syphilis

The incidence of syphilis continued to fall for the year under review (tables I and III) and there were decreases in all categories. There was a decrease of 8% for primary and secondary syphilis, 6% for men and 23% for women. Cases of late syphilis decreased

TABLE I Cases of syphilis, gonorrhoea, and chancroid reported in England for the year ended 31 December 1982 with the figures for the year ended 31 December 1981 in parentheses (for the incidence rate per 100 000 population see table III)

	Total	Men	Women
Syphilis			
Early	2 145 (2 279)	1 804 (1 934)	341 (345)
Primary and secondary only	1 337 (1 451)	1 187 (1 258)	150 (193)
Late	1 293 (1 396)	877 (969)	416 (427)
Congenital	126 (135)	58 (60)	68 (75)
Gonorrhoea			
All forms	52 156 (52 200)	33 058 (33 454)	19 098 (18 746)
Post-pubertal gonorrhoea			
All ages	52 132 (52 174)	33 049 (33 448)	19 083 (18 726)
Under 16 years	429 (361)	115 (96)	314 (265)
16-19 years	10 449 (10 266)	4 469 (4 351)	5 980 (5 915)
20-24 years	18 532 (18 256)	11 382 (11 000)	7 150 (7 256)
25-34 years	15 534 (16 054)	11 149 (11 943)	4 385 (4 111)
35-44 years	5 347 (5 369)	4 386 (4 446)	961 (923)
45 years and over	1 841 (1 868)	1 548 (1 612)	293 (256)
Chancroid	125 (91)	88 (64)	37 (27)

TABLE II Other sexually transmitted diseases reported in England in the year ended 31 December 1982 with the figures for the year ended 31 December 1981 in parentheses (for incidence per 100 000 population see table IV)

	Total	Men	Women
Lymphogranuloma venereum	30 (40)	19 (30)	11 (10)
Granuloma inguinale	15 (25)	13 (11)	2 (14)
Non-specific genital infection (NSGI)	128 197 (120 018)	93 983 (90 071)	34 214 (29 947)
NSGI with arthritis	501 (583)	476 (547)	25 (36)
Trichomoniasis	20 162 (20 224)	1 620 (1 662)	18 542 (18 562)
Candidiasis	52 404 (46 947)	10 328 (9 496)	42 076 (37 451)
Scabies	2 044 (2 145)	1 652 (1 748)	392 (397)
Pediculosis pubis	9 799 (8 718)	6 620 (5 970)	3 179 (2 748)
Genital herpes	13 653 (11 147)	7 810 (6 631)	5 843 (4 516)
Genital warts	33 343 (29 704)	20 639 (18 807)	12 704 (10 897)
Genital molluscum	1 378 (1 212)	887 (730)	491 (482)
Other treponemal diseases	833 (878)	532 (556)	301 (322)
Other conditions requiring treatment in a centre	79 019 (67 842)	40 883 (37 288)	38 136 (30 554)
Other conditions not requiring treatment in a centre	117 127 (111 407)	73 506 (69 610)	43 621 (41 797)
Other conditions referred elsewhere	3 318 (2 933)	1 822 (1 551)	1 496 (1 382)

by 7%. There were 39 cases of cardiovascular syphilis and 89 cases of neurosyphilis. Only 12 of the 126 cases of congenital syphilis were early infections (that is, in children aged under 2).

### Chancroid

The incidence of reported cases of chancroid infection has trebled since 1979 (table III). Much of the increase is due to the large number of cases reported from one particular area, where there is special interest in the causative organism and where it was found most commonly as a secondary pathogen in herpetic lesions.

### Non-specific genital infection

This is now nearly three times more common than gonorrhoea as a cause of urethritis in men; 40-50% of cases are caused by *Chlamydia trachomatis*. Diagnosis of non-specific genital infection in women is often difficult, and the true incidence of this condition is undoubtedly much higher than the reported figures. Improved facilities for growing *Chlamydia trachomatis* are urgently needed if this infection is to be diagnosed in women before pelvic infection supervenes or other partners are infected. New methods of diagnosis employing monoclonal antibody are being assessed.

### Trichomoniasis

The incidence of trichomonal infection has remained fairly constant in the past decade. The low reported incidence in men probably reflects the largely asymptomatic nature of the condition and the difficulty of diagnosis in men.

### Candidosis

The number of cases in women increased by 12% and in men by 9%. It is the most common infection in women reported by clinics, but the proportion acquired through sexual contact is uncertain.

### Genital herpes

The number of cases of genital herpes diagnosed at clinics continues to increase. The overall total rose by 22% in 1982, and in women the increase was 29%. Part of the increase may have been due to public awareness resulting from considerable publicity on this subject in the media.

At present there is no remedy that can prevent subsequent attacks of herpes. Acyclovir will only prevent attacks while it is being taken and is under trial as long term prophylactic treatment for patients with frequent recurrences. Vaccines are being assessed and may offer protection against infection; they are much less likely to benefit those who are already infected.

### Genital warts

The total number of cases diagnosed increased by 12% from 29 704 in 1981 to 33 343 in 1982. There is now considerable evidence of an association between wart virus infection of the cervix and premalignant changes.

### The clinics

The steady increase in the numbers of patients that attend the clinics continues to put a strain on the service for sexually transmitted diseases. Many of the

TABLE III The venereal diseases—new cases per 100 000 population by age seen at hospital clinics in England in 1978-92

	1978			1979			1980			1981			1982		
	Men	Women	Total	Men	Women	Total	Men	Women	Total	Men	Women	Total	Men	Women	Total
Early syphilis															
All ages	10.53	1.74	6.02	9.45	1.48	5.36	9.41	1.60	5.41	8.50	1.44	4.90	7.92	1.42	4.58
Primary and secondary only	6.77	0.92	3.76	5.88	0.80	3.28	5.92	0.87	3.33	5.53	0.80	3.10	5.21	0.62	2.86
Under 16 years	0.11*	0.06*	0.08*		0.06*	0.02*		0.06*	0.03*	0.06*	0.06*	0.03*	0.04*	0.08*	0.06*
16-19 years	5.07	2.89	4.00	4.87	3.38	4.14	4.06	3.78	3.91	4.40	2.99	3.71	3.04	1.96	2.52
20-24 years	18.10	4.13	11.31	14.12	2.76	8.56	14.83	3.47	9.27	15.27	3.52	9.48	13.34	2.51	7.99
25 years and over	8.23	0.70	4.25	7.29	0.60	3.77	7.29	0.58	3.75	6.48	0.56	3.35	6.29	0.45	3.21
Late syphilis															
All ages	4.56	1.81	3.15	4.22	1.81	2.98	4.16	2.04	3.07	4.26	1.78	2.98	3.85	1.73	2.76
Congenital syphilis															
All ages	0.17	0.36	0.27	0.19	0.35	0.28	0.27	0.24	0.26	0.26	0.31	0.29	0.25	0.28	0.27
Gonorrhoea (post-pubertal)															
All ages	157.77	88.41	122.18	154.75	84.22	118.59	150.49	85.26	117.04	146.96	77.94	111.52	145.06	79.46	111.39
Under 16 years	1.82	6.44	4.07	1.50	5.86	3.62	1.75	5.99	3.81	1.82	5.30	3.52	2.22	6.40	4.25
16-19 years	294.39	453.31	372.21	284.80	412.83	347.31	276.65	420.00	345.53	277.54	393.83	334.44	277.65	390.93	332.84
20-24 years	667.20	463.50	569.57	654.29	449.88	554.23	650.23	454.13	554.19	626.78	425.17	527.39	619.77	399.26	510.90
25 years and over	143.78	44.04	91.13	139.67	41.27	87.78	131.52	39.88	83.20	127.04	33.44	77.67	120.66	35.72	75.87
Chancroid															
All ages	0.22	0.01*	0.11	0.16	0.02*	0.09	0.17	0.07	0.12	0.28	0.11	0.19	0.39	0.15	0.27

TABLE IV Other sexually transmitted diseases and other conditions—new cases per 100 000 population of all ages seen at hospital clinics in England in 1978-82

	1978			1979			1980			1981			1982		
	Men	Women	Total	Men	Women	Total	Men	Women	Total	Men	Women	Total	Men	Women	Total
Lymphogranuloma venereum	0.10	0.01*	0.06	0.09	0.04	0.06	0.10	0.03*	0.06	0.13	0.04	0.85	0.08	0.05	0.06
Granuloma inguinale	0.04*	0.01*	0.02	0.08	0.05	0.06	0.07	0.02*	0.04	0.04	0.06	0.05	0.06	0.01*	0.03
Non-specific genital infection	347.52	83.91	212.28	356.67	91.41	220.67	383.82	115.02	245.98	395.74	124.65	256.53	412.51	142.47	273.93
Non-specific genital infection with arthritis	1.87	0.13	0.99	1.93	0.08	0.98	2.27	0.13	1.17	2.40	0.15	1.25	2.09	0.10	1.07
Trichomoniasis	7.41	76.15	42.68	7.03	75.33	42.05	8.42	78.62	44.42	7.30	77.26	43.23	7.11	77.21	43.08
Candidiasis	36.23	131.99	85.36	35.61	133.03	85.56	40.68	148.53	95.98	41.72	155.88	100.34	45.33	175.20	111.98
Scabies	7.70	1.89	4.72	7.39	1.70	4.47	7.95	2.05	4.92	7.68	1.65	4.58	7.25	1.63	4.37
Public lice (pediculosis pubis)	20.73	8.83	14.62	22.97	90.60	16.12	24.10	10.53	17.14	26.22	11.44	18.63	29.06	13.24	20.94
Herpes simplex	23.20	13.33	18.14	24.16	14.25	19.08	27.16	16.34	21.61	29.13	18.80	23.83	34.28	24.33	29.17
Warts (condylomata acuminata)	69.07	35.94	52.07	69.45	36.94	52.78	79.20	43.00	60.63	82.63	45.36	63.49	90.59	52.90	71.25
Molluscum contagiosum	2.94	1.26	2.08	2.77	1.43	2.09	3.32	1.69	2.48	3.21	2.01	2.60	3.89	2.04	2.94
Other treponemal diseases	3.09	1.61	2.33	3.23	1.49	2.34	2.52	1.48	1.99	2.44	1.34	1.88	2.34	1.25	1.78
Other conditions requiring treatment in a centre	128.74	73.07	100.17	130.27	84.49	106.80	153.48	105.81	129.04	163.83	127.17	145.01	179.44	158.80	168.85
Other conditions not requiring treatment in a centre	276.44	155.07	214.17	273.97	159.18	215.11	295.54	168.75	230.52	305.84	173.97	238.12	332.63	181.64	250.28
Other conditions referred elsewhere	5.54	3.71	4.60	5.97	3.75	4.83	6.52	4.94	5.71	6.81	5.75	6.27	7.99	6.23	7.09

\*These rates were based on fewer than 10 events and consequently their reliability as a measure may be affected.

clinics were originally designed to deal with a fraction of the patient load that they now have to accept.

The total number of hospital medical staff working in clinics in England and Wales at 30 September 1983 was 415 (244.7 whole time equivalents (WTE) compared with 418 (252.4 WTE) in September 1982. The figures for 1983 included 115 (109.7 WTE) consultants, 30 (27.7 WTE) senior registrars, 38 (36.3 WTE) registrars, and 22 (21.0 WTE) senior house officers compared with 111 (106.3 WTE) consultants, 34 (32.2 WTE) senior registrars, 37 (35.4 WTE) registrars, and 25 (24.1

WTE) senior house officers in September 1982. At 30 September 1983 there were 22 (5.5 WTE) hospital practitioners and 173 (35.8 WTE) part time medical officers (clinical assistants).

#### Reference

1. World Health Organisation. Consultative Group on Current Treatments in the Control of Sexually Transmitted Diseases. *Current treatment in the control of sexually transmitted diseases: report of a WHO Consultative Group, Geneva, 16-19 November 1982*. Geneva: World Health Organisation, 1983. (WHO/VDI/83.433).